



## Practicum Checklist

**Student Name:**

**Practicum Start Date:**

**Practicum End Date:**

**Program:** Addictions & Community Services Worker

Ameridian Pacific College views work experience as an effective means of giving students hands-on experience in their field of study. Our institution abides by section 3.2.4 of the [Private Training Act Policy Manual](#) regulated by the Private Training Institutions Branch (PTIB).

Upon successfully meeting the Program Entry Requirements, there are additional requirements that must be completed **90 days prior** \_\_\_\_ (*student initials*) in order to participate in the Practicum/Work Experience component of the program. Please ensure that you complete the following steps:

1. **Criminal Record Check:** You are required to obtain a criminal record check that is valid for the duration of your practicum. The criminal record check must clear you for working with Vulnerable Persons and Youth or Children. *If you cannot obtain one, the college can conduct a search on your behalf at the cost of \$28.*
2. **Immunization Record:** You will also need to provide a record of your immunizations. It is essential for you to be up-to-date on your immunizations to ensure the safety and well-being of yourself and others in the practicum setting.

**Your list of immunizations must include:**

Mandatory	Recommended
Diphtheria/Pertussis/Tetanus (DPT)	Proof of negative Tuberculosis (TB) test
Mumps/Measles/Rubella (MMR)	
Poliomyelitis	
Varicella (Chicken Pox)	
COVID (At least 2 doses)	
Hepatitis B (3 doses)	
Influenza (annually)	

3. **Resume:** Submit a copy of your updated resume. This will be shared with organizations to facilitate the placement process and ensure the perfect fit for both you and your work experience provider.
4. **Classroom Modules Completion:** Complete all required learning modules with a passing grade of at least 65%.



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Please ensure that you submit your documents on time. Failure to complete any of the above requirements may impede your eligibility to complete the practicum component of the program.

Should you have any questions or require any assistance, please contact us via phone at (604) 462-3080 or via e-mail at [info@ameridian.ca](mailto:info@ameridian.ca).

### **Student Acknowledgement**

I understand and acknowledge that I need to complete the requirements stated above in order to be eligible to start the work experience portion of my program.

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Student Signature

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Date Signed